Riverview Psychiatric Center

Executive Leadership Date: November 15, 2006

Committee Members Present:

- √ David Proffitt, Superintendent
- √ William Nelson, Medical Director
- √ Lauret Crommett, Nursing Director
- √ Bob Patnaude, Safety Director
- √ Barbara Sylvester-Pellett, CPI Director/Risk Management
- √ Brian Daskivich, Deputy Superintendent/Programs
- √ Teresa Mayo, Psychology Director

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- √ Terry O'Neal, Admission Coordinator
- √ Lucia Nadeau, Personnel Officer
- √ Stephanie George-Roy, Director of Social Work
- √ Jamie Morrill, Deputy Superintendent/Administrative Ser.

Minutes Annuared

√ Holly Dixon, Peer Support Coordinator

Guests:

Minute Recorder:	Charlotte Lalime Next Meeting: November 29, 2006	Minutes Approved:	
TOPIC	DISCUSSION	ACTION PLAN	PERSON
			RESPONSIBLE
Review of	Approved with amendments.		C. Lalime
Minutes			
Superintendent's	Dave reports that Hillary Burris did an exceptional job with a client	Noted	
Report	in dry rounds this morning in helping her to attain her goals. David adds that he was impressed.		
	Jamie presented a thank you note from Burnses for pledges to the walk.	Informational	
	Jamie reports that D.R. Struck, the company that worked on the berm removal, paid our clients for their work in helping with the job.	Informational	
	Tina Libby will be invited to become a member of Executive Leadership.	Charlotte will contact Tina.	C. Lalime
Initiatives	Spent hour and a half with PSDS looking at a specific incident.		
	Dave tried to impress importance of treating clients in the right way.	Informational	
	We are here to take care of those we serve, not because of the court,		

Nove Mosting: November 20, 2006

ent decree, or because the Commissioner tells us to, but because good care delivery.	ACTION PLAN	PERSON RESPONSIBLE
d explains that he has been made aware of a client requesting a en bible. David asked Chaplain Dow to speak with the client he indeed followed these beliefs to arrange to have a bible hased for him. Helen Bailey complained that Chaplain Dow had ght to question him about his beliefs. David says the client has right to practice his own religion and this right will be given to by this facility.	Informational	
elson states that we are spending \$250 for drug testing kits to	Dr. Nelson will	Dr, Nelson
n a trial basis. Dave asks if they can be legally used in the FTU	review this.	
am.		
et and Dr. Nelson need to meet re: infection control to ensure nuity of the process since Dennis Nasto left.	Report at next meeting.	L. Crommett Dr. Nelson
ing on projects and development of new indicators.	Noted	
y deadline for feedback on the fire form. If there are no fications, Bob states he will distribute.		
bility of combining the Risk Management and Safety	Report at next	
mittees. BJ will explore this possibility.	meeting.	
eision has been made to go with magnetic door hold resolution chapel door based on 5 options presented by the safety mittee.	Noted	
Committee met last week. Get together and update infection of procedures. BJ will be traveling to Portland on Friday to winfection control at the Portland Clinic.	Noted	
	nuity of the process since Dennis Nasto left. ing on projects and development of new indicators. y deadline for feedback on the fire form. If there are no fications, Bob states he will distribute. bility of combining the Risk Management and Safety nittees. BJ will explore this possibility. ision has been made to go with magnetic door hold resolution chapel door based on 5 options presented by the safety nittee. Committee met last week. Get together and update infection of procedures. BJ will be traveling to Portland on Friday to	nuity of the process since Dennis Nasto left. ing on projects and development of new indicators. y deadline for feedback on the fire form. If there are no fications, Bob states he will distribute. Dility of combining the Risk Management and Safety nittees. BJ will explore this possibility. Report at next meeting. Noted Report at next meeting. Noted Noted Noted Procedures. BJ will explore this possibility. Noted Noted Noted Noted Noted

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Clinical Leadership	Clinical Leadership is currently discussing many issues relating to treatment of addictions and wellness.	Informational	
Labor Management	Next meeting scheduled for December.	Noted	
Behavior Response Committee	The Committee met yesterday; need support of supervisors to get staff there to train as trainers. Meetings have been changed back to Mondays at 2:30. All supervisors will ensure that meetings are attended, and if a member cannot attend, this is to be communicated to Dave. This Committee is a priority.	Dave will be notified if a staff is unable to attend these meetings.	Supervisors
Nursing Leadership	Lauret reports that Nursing Leadership is meeting every other week and have been reviewing policies. Six policies are ready to be presented to the P&P Committee after review by Dr. Nelson. Lauret also states she has been clarifying roles and expectations. A standing agenda item at Nursing Leadership will be critical analysis.	Informational Noted	
	Lauret adds that we have a client with possible infection of TB – a nursing protocol is currently being developed for suspect infectious diseases.	Final investigative report to ELC at next meeting. Sheila Andrews will order the correct masks.	
Quality Council	No report		
Budget Update	The 10th pay period dated 11/8/06 of FY2007 is now showing a surplus of \$36,697.66. The accumulated surplus through the Fiscal Year is now projected to be \$543,002.44. The overtime for pay period 11/8/06 was \$34,163.95. The accumulated overtime for	Informational	

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	FY2007 is \$334,104.90. The expenditures for general operations through 11/9/06, is now \$3,805,743.03. Revenue through 11/14/06 is now \$389,773.77.		KESI ONSIDEE
Policy and	Scheduled to meet next Thursday. Nursing and Medication	Informational	
Procedure	Management have policies to review.		
Committee			
	Dr. Mayo distributed and reviewed changes in policy RI.1.10, Ethics	Approved with	
	in Client Care, with the committee.	amendments.	
P&T Committee	No report		
Leadership Reports	Jamie reports that it looks as though we have found a process to access Maine General lab reports.	Noted	
	No recommendations for quality improvement teams.	Noted	
Staff Injuries	Nurse injury – hit by door. Lot of MHW on break, not enough staff on unit. Make sure enough staff on unit during fresh air breaks. Bob to look at making doors safer. MHW kicked by client – continued investigation and review.	Lauret to assure staff deployment allows for ample staff on units.	L. Crommett
			L. Crommett
	MHW punched by client – still under investigation and will report back in two weeks.	Report at next meeting.	L. Crommett
Clinical Risk	No report.		
Management			
Staff	Angie reports that she has hired Jeff Freeman for the position of Staff	Informational	
Development	Development Specialist III. Jeff has been employed at MOCO.		
Update	Angie reports she will be attending a meeting at the Senator with 3 other hospitals for networking. Some CCMS will be attending also.		

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10110	DISCUSSION	ACTIONTLAN	RESPONSIBLE
			KESI ONSIDLE
	Two series of 40 hours in forensic training has been completed. Some of the RNs will be enrolled for the training.	Dave asks Lucia to email (and cc David) Don regarding update on forensic stipend.	L. Nadeau
New Business			
Red Alert Process	Dave received feedback on this process. Some of feedback was concern that Maws could bypass direct line of supervision – David states that this was actually by design. Goes to physician and RN IV first and this gives the RN IV an opportunity to counsel charge nurse, if needed.	Informational	
Quality Improvement Teams	BJ states that there has been a request for a medication error PIT.	Informational	
JCAHO Planning Meeting	Meeting scheduled for November 28 ^{th at} 9:00 in the Casco Bay.	Noted	
Adjourned at 12:00			